



**GULF COUNTY, FLORIDA
BUILDING DEPARTMENT**

1000 CECIL G. COSTIN, SR, BLVD., ROOM 305 * PORT ST. JOE, FLORIDA 32456 * PHONE (850) 229-8944 * FAX (850) 229-7873

ACCESSORY STRUCTURE PERMIT APPLICATION

DATE: _____

TYPE OF STRUCTURE(S):

POLE BARN: _____/SIZE: _____ CARPORT: _____/SIZE: _____

GARAGE: _____/SIZE: _____ SHED: _____/SIZE: _____

OTHER (EXPLAIN): _____/SIZE: _____

PROPERTY OWNER'S NAME & PHONE #: _____

CONSTRUCTION ADDRESS: _____

PARCEL I.D. NUMBER: _____

CONTRACTOR'S NAME & PHONE #: _____

CONTRACTOR'S LICENSE NUMBER: _____

ITEMS REQUIRED FOR PERMITTING:

- (1) SITE PLAN SHOWING ALL EXISTING STRUCTURE(S).
- (2) PROPOSED STRUCTURE DISTANCE TO ALL PROPERTY LINES.
- (3) LIST OF MATERIALS (SHED, POLE BARN, OR SIMILAR STRUCTURE).

NOTE: ITEMS **MUST** BE ATTACHED TO THIS APPLICATION WHEN SUBMITTING FOR A PERMIT.

"DECLARATION STATEMENT"

I DO HEREBY AGREE TO COMPLY WITH ALL LOCAL AND STATE REGULATIONS RELATED TO CONSTRUCTING THE ABOVE DESCRIBED STRUCTURE(S). UPON COMPLETION OF BUILDING THE NOTED STRUCTURE(S), I WILL PROVIDE ANY DOCUMENTS REQUESTED BY THE GULF COUNTY BUILDING DEPARTMENT IN ORDER TO ASSURE COMPLIANCE.

PRINTED NAME: _____ SIGNATURE: _____